

PRINTER RUSH

(PTO ASSISTANCE)

Application : 10/817117

Examiner : Boesen

GAU : 1648

From: AB

Location: IDC FMF FDC

Date: 1-29-08

Tracking #: 10/817117

Week 12-24-07

Date:

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>11-21-2007</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW/FWCLM		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Original claim 15 [now 4] depends upon canceled original claim 13.

*Frank Gay
AB*

[XRUSH] RESPONSE: Please amend claim 15 to be dependent from claim 1, instead of canceled claim 13. AB

INITIALS:

EXAMINER: PUBS contacts -- for DESIGNS: Don Fairchild, 703-308-9250 x126; for ALL OTHER FILES:

Bernadette Queen, 703-308-9250 x121

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.